

Pace Training Program
Office of Vocational Rehabilitation
Weekly Evaluation OVR18C

Trainee Name _____ Pace Site _____

Pace Staff _____ Vocational Counselor _____

Work Week _____

Job Duties _____

Work Related Skills	Exceeds Expectations	Good	Needs Improvement
Adaptability			
Attendance/Punctuality			
Attentiveness/Concentration			
Cooperation with supervisor			
Following directions			
Frustration tolerance			
Interaction with co-workers			
Motivation/Attitude			
Oral communication			
Personal hygiene/grooming/dress			
Quality of work			
Quantity of work			
Safety consciousness			
Trustworthiness			
Working independently			
Written communication			
Other:			
Other:			

Observations and comments regarding job performance:

Employer Signature

Date

Staff Signature

Date